## 2020 LAW ENFORCEMENT TOW LIST APPLICATION

All areas in white must be completed. Please print legibly.

		;						
Business Name:								
Business Office			STREET					
(shall be located a address)	t the sam	е	CITY			STATE	ZIP	CODE
Business Phone:	(	١		hours/day, 7 days/w	Email:			
Capacity of Vehice Lot:	le Storaç	ge		mber of Vehicles	Years in B	usiness:	Nu	umber of Years in Industry
		SI	ECTION 2: OW	NERSHIP/ M.	ANAGEME	NT ———		
Owner's Name:	FIRST			MIDDLE		LAST		
Address: STRE	<u>ET</u>		Manager	's Name:		STA	ATE	ZIP CODE
relephone. (			Wanager	5 Haine.				
	gency Cei	rtified (i.e	ECTION 4: Al	(i		flat tire, m	inor roads	side repairs, etc.)
	gency Cei	rtified (i.e	., AAA, etc.) Lis	(i	i.e., change	flat tire, mi	inor roads	side repairs, etc.)
	gency Cel	rtified (i.e	., AAA, etc.) Lis	t Agencies:	i.e., change	flat tire, mi	inor roads	side repairs, etc.)
Road Service A		rtified (i.e	., AAA, etc.) Lis	ot Agencies:	i.e., change	LAST	inor roads	
Driver's Name:  Date of Birth:  Address: STREE	FIRST /	rtified (i.e	s., AAA, etc.) Lis	ot Agencies:	i.e., change	LAST Years in	n Towing:	
Driver's Name:  Date of Birth:	FIRST /	rtified (i.e	s., AAA, etc.) Lis	ot Agencies:  ON 5: DRIVE	i.e., change	LAST Years in	n Towing:	:
Driver's Name:  Date of Birth:  Address:  STREET  Driver's License	FIRST /	rtified (i.e	s., AAA, etc.) Lis	ot Agencies:  ON 5: DRIVE  MIDDLE  ( )  CITY	i.e., change	Years in	n Towing	:
Driver's Name: Date of Birth: Address: STREE Driver's License Number:	FIRST /	rtified (i.e	s., AAA, etc.) Lis	ot Agencies:  ON 5: DRIVE	i.e., change	LAST Years in STA Sta Iss	n Towing	ZIP CODE
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